RECEIVED FEC MAIL CENTER

## **FEC FORM 9**

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR NOV 10 PM 3: 29 ELECTIONEERING COMMUNICATIONS

Person Making the Disbursements/Obligations	
(a) Maring	
(b) Address (number and street)	<del></del>
300 M STREET, SE SUITE 1/02	2. FEC Identification Number
(c) City, State and ZIP Code  WASH INGTON, DC 2003	C30000988
(d) Name of Employer or Principal Place of Business	(e) Occupation
10/11	MA
New 4. Covering Period 4. Covering Period	07 27 2008 through
Amended	09 22 2008
. (a) Date of Public Distribution(s) 22 22 2008 (b) Corr	nmunication Title NW MERCH 2) (ETS PROM
The filer is a(n): (a) Individual (b) Unincorporated Organization (c)	Qualified Nonprofit Corporation (11 CFR 114.10)
(d) Corporation, Labor Organization or Qualified Nonprofit Corporation ma	
(e) Other, specify:	
to/hand Outst, spesify.	
7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, Yes No Were the disbursements made exclusively from donations to a segregated bank account?	
Custodian of Records	
(a) Name	
(b) Address (number and street)	
300 M STREET SE SUITE 1/12	· ·
(c) City, State and ZIP Code	
(d) Name of Employer or Principal Place of Business	(e) Occupation
PATRIOT MAJORITY MIDNEST	PRESIDENT
. Total Donations This Statement	11.1.000
). Total Disbursements/Obligations This Statement	0.50
Under penalty of perjury, I certify that this statement is true, correct and complete.  TYPE OR PRINT NAME OF PERSON COMPLETING FORM	VARO GA
	10 111-12-01
SIGNATURE WAY V	DATE W WON LOOK